# DHHS SMALL, SMALL DISADVANTAGED, HUBZone AND WOMAN-OWNED SMALL BUSINESS SUBCONTRACTING PLAN

		DATE OF PL	AN:
CONTRACTOR:			
ADDRESS:			
DUNN & BRADSTRE	ET NUMBER:		
SOLICITATION OR C	ONTRACT NUMBER:		
ITEM/SERVICE (Desc	ription):		
TOTAL CONTRACT A	AMOUNT (Breakout Opt		\$
		Base year or	Option #1
\$	\$	Multi-year amount \$	(If applicable)
Option #2 (If applicable)	Option #3 (If applicable)	Option #4 (If applicable)	
	ON AMOUNT, IF APPL R AMOUNT, IF APPLIC		
PERIOD OF CONTRA	CT PERFORMANCE (M	Month, Day & Year):	

The following is a suggested model for use when developing subcontracting plans as required by P.L. 95-507 and implemented by Federal Acquisition Regulations (FAR) Subpart 19.7. While this model plan has been designed to be consistent with statutory and regulatory requirements, other formats of a subcontracting plan may be acceptable; however, failure to include the essential information as exemplified in this model may be cause for either a delay in acceptance or the rejection of a bid or offer when a subcontracting plan is required. Further, the use of this model is not intended to waive other requirements that may be applicable under statute or regulation. "SUBCONTRACT," as used in this clause, means any agreement (other than one involving an employer-employee relationship) entered into by a federal Government prime contractor or subcontractor calling for supplies or services required for performance of the contract or subcontract.

1. Type of Plan (check one)
Individual plan (all elements developed specifically for this contract and applicable for the full term of this contract)
Master plan (goals developed for this contract; all other elements standardized and approved by a lead agency Federal Official; must be renewed every three years and contractor must provide copy of lead agency approval)
Commercial product/service plan (contractor sells large quantities of off-the shelf commodities to many Government agencies. Plans/goals negotiated on a company, division, plant or product line basis reflecting projected annual sales for commercial and non-commercial items. Must be renewed annually and contractor must provide copy of lead agency approval).
<b>2. Goals</b> State separate dollar and percentage goals for Small Business (SB), Small Disadvantaged Business (SDB), Woman-owned Small Business (WOSB), Historically Underutilized Business Zone (HUBZone) and <b>?</b> Other@ than small business (OTHER) as subcontractors, for the base year and each option year, as specified in FAR 19.704 (break out and append option year goals, if applicable) or project annual subcontracting base and goals under commercial plans.
a. Total estimated dollar value of ALL planned subcontracting i.e., with ALL types of concerns under this contract is \$
b. Total estimated dollar value and percent of planned subcontracting with SMALL BUSINESSES (including SDB, WOSB and HUBZone): (% of "a")  \$ and%
c. Total estimated dollar value and percent of planned subcontracting with SMALL DISADVANTAGED BUSINESSES: (% of "a")  \$ and%
d. Total estimated dollar value and percent of planned subcontracting with WOMAN-OWNED SMALL BUSINESSES: (% of "a")\$ and%
e. Total estimated dollar and percent of planned subcontracting with HUBZone SMALL BUSINESSES: (% of "a")\$ and%
f. Total estimated dollar and percent of planned subcontracting with AOTHER@ THAN SMALL BUSINESSES: (% of "a")\$ and%
Provide a description of ALL the products and/or services, to be subcontracted under this contract, and indicate the size and type of business supplying them [i.e. (OTHER), (SB), (SDB), (WOSB), (HUBZone)].

## TYPE OF BUSINESS (Check all that Apply)

Subcontracting Product/Service	Other	SB	SDB	WOSB	HUBZon e

g. Provide a description of the method used to develop the subcontracting goals for small, small disadvantaged, woman-owned and HUBZone small businesses concerns. Address efforts made to ensure that maximum practicable subcontracting opportunities have been made available for those concerns and explain the method used to identify potential sources for solicitation purposes. Explain the method and state the quantitative basis (in dollars) used to establish the percentage goals. Also, explain how the areas to be subcontracted to small, small disadvantaged, woman-owned and HUBZone small business concerns were determined and how the capabilities of these concerns were considered for subcontract opportunities. Identify any source lists or other resources used in the determination process. (attach additional sheets, if necessary)

h. Indirect costs have	have not	been included in	the dollar	and perce	ntage
subcontracting goals above	e. (check one)			-	

If indirect costs have been included, explain the method used to determine the proportionate share of such costs to be allocated as subcontracts to small, small disadvantaged, woman-owned, and HUBZone small business concerns.

#### 3. Program Administrator:

NAME/TITLE:

ADDRESS:

TELEPHONE/E-MAIL:

**Duties**: Has general overall responsibility for the company's subcontracting program, i.e., developing, preparing, and executing subcontracting plans and monitoring performance relative to the requirements of those subcontracting plans. Other duties include, but are not limited to, the following activities:

a. Developing and promoting company-wide policy initiatives that demonstrate the company's support for awarding contracts and subcontracts to small, small disadvantaged,
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- woman-owned and HUBZone small business concerns; and for assuring that these concerns are included on the source lists for solicitations for products and services they are capable of providing.
- b. Developing and maintaining bidder source lists of small, small disadvantaged, woman-owned and HUBZone small business concerns from all possible sources;
- c. Ensuring periodic rotation of potential subcontractors on bidder's lists;
- d. Ensuring that requests for contracts (RFC) are designed to permit the maximum practicable participation of small, small disadvantaged, woman-owned and HUBZone small businesses:
- e. Accessing various sources for the identification of small, small disadvantaged, woman-owned and HUBZone small businesses concerns to include the SBA's PRONET System, the Federal Acquisition Computer Network (FACNET) Contractor Registration Data Base, the National Minority Purchasing Council Vendor Information Service, the Office of Minority Business Data Center in the Department of Commerce, local small business and minority associations, contact with local chambers of commerce and Federal agencies' Small Business Offices;
- f. Establishing and maintaining contract and subcontract award records;
- g. Participating in Business Opportunity Workshops, Minority Business Enterprise Seminars, Trade Fairs, Procurement Conferences, etc;
- h. Ensuring that small, small disadvantaged, woman-owned and HUBZone small business concerns are made aware of subcontracting opportunities and assisting concerns in preparing responsive bids to the company;
- i. Conducting or arranging for the conduct of training for purchasing personnel regarding the intent and impact of Public Law 95-507 on purchasing;
- j. Monitoring the company's subcontracting program performance and making any adjustments necessary to achieve the subcontract plan goals;
- k. Preparing, and submitting timely, required subcontract reports;
- 1. Coordinating the company's activities during the conduct of compliance reviews by Federal agencies, and;

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m.	Other duties:_			 			

## 4. Equitable Opportunity

Describe efforts the offeror will make to ensure that small, small disadvantaged, woman-owned and HUBZone small business concerns will have an equitable opportunity to compete for subcontracts. These efforts include, but are not limited to, the following activities:

- a. Outreach efforts to obtain sources:
  - 1) Contacting minority and small business trade associations;2) Contacting business development organizations and local chambers of commerce;3) Attending small, small disadvantaged, woman-owned and HUBZone small business procurement conferences and trade fairs; 4) Requesting sources from the Small Business Administrations (SBA) PRONET, and other SBA resources, and;
  - 5) Conducting market surveys to identify new sources.
- b. Internal efforts to guide and encourage purchasing personnel:
  - 1) Conducting workshops, seminars, and training programs;
  - 2) Establishing, maintaining, and utilizing small, small disadvantaged, and woman-owned and HUBZone small business source lists, guides, and other data for soliciting subcontractors, and;
  - 3) Monitoring activities to evaluate compliance with the subcontracting plan.

#### c. Additional efforts:

### 5. Flow Down Clause

The contractor agrees to include the provisions under FAR 52.219-8, "Utilization of Small, Small Disadvantaged, and Women-Owned Small Business Concerns", in all subcontracts that offer further subcontracting opportunities. All subcontractors, except small business concerns, that receive subcontracts in excess of \$500,000 (\$1,000,000 for construction) must adopt and comply with a plan similar to the plan required by FAR 52.219-9, "Small, Small Disadvantaged, and Women-Owned Small Business Subcontracting Plan." (FAR 19.704(a)(4).

## 6. Reporting and Cooperation

The contractor gives assurance of (1) cooperation in any studies or surveys that may be required; (2) submission of periodic reports which show compliance with the subcontracting plan; (3) Submission of Standard Form (SF) 294, "Subcontracting Report for Individual Contracts," and attendant Optional Form 312, SDB Participation Report and SF-295, "Summary Subcontract Report," in accordance with the instructions on the forms; and (4) ensuring that subcontractors agree to submit Standard Forms 294 and 95.

Reporting Period	Report Due	Due Date
Oct 1 - Mar 31	SF-294/of 312	4/30
Apr 1 - Sept 30	SF-294/of 312	10/30
Oct 1 - Sept 30	SF-295	10/30

Special instructions for commercial products plan: SF295 Report is due on 10/30 each year for the previous fiscal year ended 9/30.

- (a) Submit SF-294 and attendant of Form 312 to: cognizant Contracting Officer
- (b) Submit SF-295 to cognizant contracting officer and to the: Office of Small and Disadvantaged Business Utilization Department of Health and Human Services 200 Independence Avenue, SW Humphrey H. Building, Room 517-D Washington, D.C. 20201
- (c) Submit "info" copy to SBA Commercial Market Representative (CMR); call SBA at 202/205-6475 to locate CMR.

## 7. Record keeping

The following is a recitation of the types of records the contractor will maintain to demonstrate the procedures adopted to comply with the requirements and goals in the subcontracting plan. These records will include, but not be limited to, the following:

- a. Small, small disadvantaged, woman-owned and HUBZone small businesses source lists, guides and other data identifying such vendors;
- b. Organizations contacted in an attempt to locate small, small disadvantaged, and woman-owned and HUBZone small business sources:
- c. On a contract-by-contract basis, records on all subcontract solicitations over \$100,000, which indicate for each solicitation (1) whether small business concerns were solicited, and, if not; (2) whether small disadvantaged business concerns were solicited, if not, why not; (3) whether woman-owned small business concerns were solicited, and if not, why not; and (4) whether HUBZone small business concerns were solicited, if not, why not and (5) the reason for the failure of solicited small, small disadvantaged, and woman-owned and HUBZone small business concerns to receive the subcontract award:
- d. Records to support other outreach efforts, e.g., contracts with minority and small business trade associations, attendance at small and minority business procurement conferences and trade fairs:
- e. Records to support internal guidance and encouragement provided to buyers through (1) workshops, seminars, training programs, incentive awards; and (2) monitoring performance to evaluate compliance with the program & requirements, and;
- f. On a contract-by-contract basis, records to support subcontract award data including the name address, and business type and size of each subcontractor. (This item is not required for company or division-wide commercial products plans.)
- g. Additional records:

## SIGNATURE PAGE

(If applicable)

This subcontracting plan was submitted by
Contractor:
Contractor Signature:
Typed Signature:
Title:
Date Prepared:
This Plan (Check One) [ ] Individual [ ] Master [ ] Commercial
Is Accepted By: Federal Agency:
Federal Contracting Officer Signature:
Typed Name:
Date: